

[Report 1951] / Medical Officer of Health, Newton Abbot R.D.C.

Contributors

Newton Abbot (England). Rural District Council.

Publication/Creation

1951

Persistent URL

<https://wellcomecollection.org/works/c2u8eav2>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

HEALTH
C21 NOV 52
C.R. 53

LIBRARY

NEWTON ABBOT
RURAL DISTRICT COUNCIL
ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR
1951.
---oOo---





H. M. DAVIES.

M.A., M.R.C.S., L.R.C.P., D.P.H.

ASSISTANT COUNTY MEDICAL OFFICER:

DEVON COUNTY COUNCIL.

MEDICAL OFFICER OF HEALTH:

ASHBURTON U.D.C.

DAWLISH U.D.C.

NEWTON ABBOT R.D.C.

NEWTON ABBOT U.D.C.

TELEPHONE No. 715/6

COUNCIL OFFICES,

KINGSTEIGNTON ROAD,

NEWTON ABBOT.

NEWTON ABBOT RURAL DISTRICT COUNCIL

ANNUAL REPORT - 1951.

Mr. Chairman and Councillors,

Madam and Gentlemen,

I present herewith my Annual Report for the year ending the 31st. December, 1951. The general health of the community remains satisfactory and the vital statistics compare favourably with those for the Administrative County of Devon and with those for England and Wales as a whole. In particular I would draw your attention to the Infant and Neo-Natal Mortality Rates on page five. These rates are extremely low in this Rural District and are taken by many authorities as the best indication of the sanitary state of an Area.

There was a considerable increase in the number of cases of Infectious Diseases reported during the year. This is mainly due to a severe epidemic of Measles. It is characteristic of Measles to occur in epidemic form in alternate years, the 1951 outbreak was not unexpected. The fifteen cases of Food Poisoning occurred in a Boarding School in the District. Extensive investigations of food-stuffs used at the School failed to reveal the source of the infection.

It is many years since a case of Diphtheria was reported. The need for immunisation against Diphtheria persists and it is as essential as ever if this Infectious Disease is to be kept in check.

A comprehensive survey of the various water supplies was made during the year and was the subject of a separate report. As a result of this some of the measures which

your Surveyor and I recommended to the Council have been undertaken. Much remains to be done and with the present shortage of finance and technical staff the completion of these works may well be prolonged. The most important factor in maintaining a water supply in a high state of purity for 365 days in the year is supervision. This supervision must be given conscientiously and care of the undertakings supplying small hamlets takes as much time and trouble as do those supplying the larger districts. As and when further water supplies are made available to different parishes in this Rural District I will, where possible, recommend that these supplies should be obtained from one or other of the major trunk mains which traverse the Rural District, rather than that small local supplies should be used.

On three occasions unpasteurised milk sold in this area was found to be infected with bovine tuberculosis. Immediate action was taken to see that all milk from the infected source was heat treated before being sold. The infected cattle were isolated and destroyed. Bovine tuberculosis is a disease that can be eradicated from the country by the elimination of infected cows from the milk producing herds. This elimination will take some years to complete but all practical steps should be taken immediately to encourage this end. As an additional and alternative safeguard one cannot recommend too strongly the consumption of pasteurised milk especially in the case of young children. Properly pasteurised milk may be regarded as quite safe from all the milk borne diseases.

In one case action had to be taken to effect the removal of a person 'in need of care and attention'. This is always a most distressing work but with the ageing population and with the freedom of legal obligation on the children of these aged people, cases are liable to become more frequent.

The condition of many of the older houses in the District continues to deteriorate. There are very many houses in this Area in which the rent is 6/- per week and less - even as little as 2/- per week. These rents are quite uneconomic and the result is that the only works done on these properties is emergency patchwork and the usual maintenance works for the preservation of the houses are neglected. The result: an increase in the numbers of houses which are not capable of being made fit for habitation at a reasonable expense. This in turn leads to increased demands for Council houses. I did recommend to your Council to take this matter up with the Rural District Councils Association, this was done at the time of the last Parliamentary Election. It would seem common sense to preserve these older houses, apparently it is Politics: these two are different.



Digitized by the Internet Archive
in 2017 with funding from
Wellcome Library

<https://archive.org/details/b29909235>

In the statistical parts of this report it will be noted that the Birth and Death rates are calculated as 'Crude' and also as 'Corrected'.

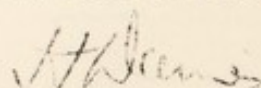
The 'Crude' rate represents the actual figure as obtained by arithmetical proportion.

The 'Corrected' or 'Standardised' rate takes into account the difference in the distribution of the age groups and the proportion of the sexes in the Newton Abbot Rural District as compared with the rest of the Country. The figure thus obtained gives a truer comparison between the state of affairs in this Rural District as compared with the larger units of population.

I should like to thank the Chairman, Councillors, and all members of the staff for the help and co-operation received during the year.

I have the honour to be,

Your obedient Servant,



Medical Officer of Health.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres)	92,650
Population Mid - 1951	25,570
Population 1951 Census	25,795
Rateable Vaule as at 1st. January, 1951	£. 140,836
Rateable Value as at 31st. December, 1951	£. 143,044
Product of 1d. rate (as at 1st. April, 1951) .	£. 566

VITAL STATISTICS.

LIVE BIRTHS.

	Male.	Female.	Total.
Legitimate	185	150	335
Illegitimate	11	5	16.
	<u>196.</u>	<u>155.</u>	<u>351.</u>

Crude Live Birth rate per 1000 total population....	- 13.73
Corrected Live Birth rate per 1000 total population	- 15.10
Crude Live Birth rate per 1000 total population	
Administrative County of Devon	- 13.46
Corrected Live Birth rate per 1000 total population	
Administrative County of Devon	- 14.81
Live Birth rate per 1000 total population England	
and Wales	- 15.5.

STILL BIRTHS.

	Male.	Female.	Total.
Legitimate	3	2	5
Illegitimate	-	1	1
	<u>3</u>	<u>3</u>	<u>6.</u>

Still Birth rate per 1000 total population.....	- 0.23
Still Birth rate per 1000 total live and still births	-16.81
Still Birth rate per 1000 total live and still	
births England and Wales	-22.9

DEATHS.

During the year the average age at death, from all causes, was found to be 68.92 years, this figure shows a slight increase on that of 1950 which was 67.9 years.

	Male.	Female.	Total.
	191	202	393.
Crude Death rate per 1000 total population			- 15.37
Corrected Death rate per 1000 total population			- 11.84
Crude Death rate per 100 total population			
Administrative County of Devon			- 15.45.
Corrected Death rate per 1000 total population			
Administrative County of Devon			- 11.74
Death rate per 1000 total population England and Wales			- 12.5

Infant Mortality.

(Death of Infants under One year of age)

	Male.	Female.	Total.
Legitimate	4	2	6
Illegitimate	-	-	-

Infant Mortality rate (Death of Infants under One year) per 1000 related live births	- 17.09
Infant Mortality rate Administrative County of Devon	- 27.91
Corresponding rate England and Wales	- 29.6.

Neo-Natal Mortality.

(Death of Infants under Four weeks of age)

	Male.	Female.	Total.
Legitimate	2	1	3
Illegitimate	-	-	-

Neo-Natal Mortality rate (Death of Infants under Four weeks) per 1000 related live births	- 8.55
Neo-Natal Mortality rate Administrative County of Devon	- 19.43.
Corresponding rate England and Wales	- 18.8.

Maternal Mortality.

One maternal death occurred during the past year in this Rural District. Six maternal deaths occurred in the Administrative County of Devon.

Maternal Mortality rate (Maternal deaths per 1000		
	Live Births)	- 2.85.
Corresponding rate Administrative County of Devon		- 0.88.

AGE AT DEATH.

	Male.	Female.
Infants under 4 weeks	2	1
Infants under 1 year	2	1
1 -	1	3
5 -	-	2
15 -	7	1
25 -	11	8
45 -	43	26
65 -	46	47
75 and over	79	113
	-----	-----
	191	202.
	-----	-----

Total: 393.

CAUSES OF DEATH

	Male.	Female.
All causes	191	202
Tuberculosis, respiratory	2	3
Whooping Cough	1	-
Acute Poliomyelitis	-	1
Other infective and parasitic diseases	-	2
Malignant neoplasm, stomach	2	2
Malignant neoplasm, lung, bronchus	5	1
Malignant neoplasm, breast	-	5
Malignant neoplasm, uterus	-	3
Other malignant and lymphatic neoplasms	20	17
Leukaemia, aleukaemia	1	-
Diabetes	3	-
Vascular lesions of nervous system	20	22
Coronary disease, angina	24	9
Hypertension with heart disease	4	7
	-----	-----
c/fwd.	82	72

CAUSES OF DEATH (contd.)

	Male.	Female.
b/fwd.	32	72
Other heart disease	35	57
Other circulatory disease	5	10
Influenza	7	5
Pneumonia	3	10
Bronchitis	9	11
Other diseases of respiratory system	1	1
Ulcer stomach and duodenum	4	5
Gastritis, enteritis and diarrhoea	1	1
Nephritis and nephrosis	2	3
Hyperplasia of prostate	5	-
Pregnancy, childbirth,, abortion	-	1
Congenital malformations	1	1
Other defined and ill-defined diseases	21	20
Motor vehicle accidents	6	2
All other accidents	4	2
Suicide	4	-
Homicide and operations of war	1	1
	<u>191</u>	<u>202</u>

Total: 393.

INFECTIOUS DISEASES.

	Male.	Female.	Total.
Scarlet Fever	2	3	5
Whooping Cough	53	62	115
Measles	312	301	613
Acute pneumonia	1	3	4
Poliomyelitis	-	1	1
Puerperal Pyrexia	-	2	2
Food Poisoning	-	15	15
Erysipelas (facial)	1	-	1
	<u>369</u>	<u>387</u>	<u>756.</u>

TUBERCULOSIS.

Eleven cases of respiratory tuberculosis were notified during the year. Details are set out in the following table:

<u>AGE PERIODS.</u>		<u>CASES.</u>	
		<u>M.</u>	<u>F.</u>
Infants under One year		-	-
1	-	-	-
5	-	-	-
15	-	-	4
25	-	4	1
45	-	-	1
65	-	1	-
75 and over		-	-
		-----	-----
		5	6
		-----	-----

Total: 11.

HOUSING.

During the year under review eighty-two houses have been completed as shown in the table given below:-

Details as to Council Houses erected:-

<u>PARISH.</u>	<u>NUMBER OF HOUSES.</u>
KINGSTEIGNTON	22
BOVEY TRACEY	18
KERSWELLS (Kingskerswell)	4
MORETONHAMPSTEAD	4
ILSINGTON (Liverton)	10
HACCOMBE-WITH-COOMBE	2
BROADHEMPSTON	4
HENNOCK (Chudleigh Knighton)	14
TORBRYAN (Denbury)	4

	82.

Total: 82.

HOUSING (contd.)

Private Enterprise.

During the year the number of Houses completed under the heading of private enterprise was nine.

ACTION UNDER HOUSING ACTS.

Under the provisions of Section 11
of the Housing Act, 1936.

Thirty-one Notices were served.
Three properties were re-conditioned according
to Undertakings given.
The remainder are closed or awaiting removal of
present tenants.

Under the provisions of Section 9
of the Housing Act, 1936.

Two Notices were served.

Housing Act, 1949.

No grants were made under the provisions of the
Housing Act, 1949.
